were born to be the servants of God, and the companions of each other: as we sprang from the same parent, so we naturally partake of the same affections. We are brethren, sons of the same father: we are friends; for surely kindredship should be the most exalted friendship. Let us not then disagree, because our herdmen have disagreed; since that were to encourage every idle prone, and senseless animosity. Great, indeed, has been our success since our migration into this fair country: we have much substance, and much cattle. But what! shall brothers quarrel, because it has pleased Heaven to prosper them? This would be ingratitude, impiety! But if, notwithstanding these persuasives, thy spirit is still troubled, let us separate: rather than contend with a brother, I would, hard as it is, even part with him for a time. Perhaps the occasion of dispute (which I have already forgotten) will soon be no more remembered by thee. Is not the whole land before thee? Take then my blessing, and my embrace, and separate thyself from me. To thee is submitted the advantages of choice; if thou wilt take the left hand, then, that I may not appear to thwart the [illegible] will take the right; or, if thou art more inclined to the country which lies upon the right, then will I go to the left. Be it as thou wilt, and whithersoever thou wilt, happy mayest thou be!"

Lot lifted up his brother, and departed. He cast his eyes on the well-watered plains of Jordan. When he separated, it appears to have been with [illegible] while Abra-

it, I have said to myself, *This man gives too much for his whistle.*

When I saw another fond of popularity, constantly empl[illegible]les, neglecting his own [illegible] neglect, *He pays indeed [illegible] tle.*

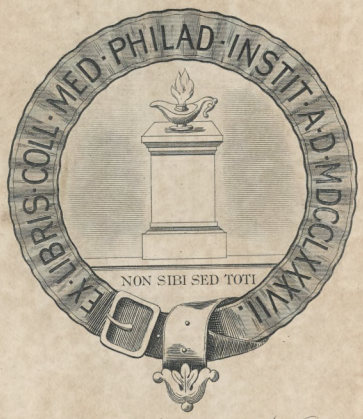
If [illegible] very kind of comfortable [illegible] ing good to others, all the [illegible]s, and the joys of benevolence [illegible] of accumulating wealth [illegible] *d pay too much for your [illegible]*

W[illegible], sacrificing every laudable [illegible] of fortune, to mere sensu[illegible] *n!* said I, *you are provi[illegible] l of pleasure; you give [illegible]*

If [illegible] fine furniture, fine equipage [illegible] which he contracted d[illegible] tson; *Alas!* said I, *he h[illegible] whistle.*

In [illegible] art of the miseries of mankind, were brought upon them by the false estimate they had made of the value of things, and by their giving too much for their *whistles.*

DR. FRANKLIN.



Chapman's Lectures

Volume 7th.

Treatment of Yellow Fever —

1st. stage

If called early emetic yes or no — distinct to vomiting — purge with calo Rh. or jalap yes or no — afterwards keep bowels open with calomel or neutral salts — When bleed — diff. opinions — Chapmans — Saline diaphoretics — vapour bath — cool drinks — cold affusion — cold applications to head — omitting to skin — Cups or leeches to epigastrium — large blister — Mercurial practice — argument in favour — mode of applying — French practice — Dr. Chapman's practice with turpentine —

2nd. stage

Blisters to arms or legs — Sugar of lead — dose — method of administration — mode of operation — stimulants ammonia — Sp. turpentine — laxatives by enema — Black vomit fatal sign

Treatment. Acting on the supposition of the precise identity of Yellow Fever, & the common Bilious, practitioners were at one time in the custom of resorting to the plan of treatment dictated by this hypothesis. The treatment was made up of venaesection, and active evacuations from the alimentary canal, sometimes by means of emetics, though more commonly by cathartics. Calomel, combined with the more drastic articles, as gamboge, jaltap, & colocynth, were the purgatives most generally employed. To this were added some details suitable to the circumstances which presented themselves, and which ~~were~~ always partook, more or less, of an inflammatory character. While this course was pursued by a large majority of our most enlightened practitioners, and enjoyed their full confidence; a different plan was instituted by the French physicians from the West India Islands, who had been accustomed to combat with the Yellow Fever. Disclaiming the utility of active evacuants, they contented themselves with directing their remedies to the stomach, with the view of calming

the irritability of that viscus, which they considered the principal source of the disease. Their object was first to check vomiting, and then to wash out the offending cause from the stomach. To meet the former indication they resorted to the ordinary means, especially to fomentations to the disordered viscus, & the warm bath; and having allayed vomiting, they next deluged the bowels with their ptisans, or diluent beverages. What was the comparative success of these two methods, it is not easy to determine. But it is probable that there was no great difference in the result. Each was alike inefficient, as may be conceived from the prodigious mortality which at that time prevailed. — In the year 1798, 20,000 persons remained in the city, and of these it is computed that 6,000 died of the fever. It is presumable that not more than half of those exposed to the disorder became affected, and hence upwards of a moiety of the sick must have perished. — The French had this advantage, that by the simplicity of their treatment they acquired great popularity, & have subsequently enjoyed no small share of the public confidence. —

Encouraged by the success of mercury in the West India Islands, the physicians of this city early imitated, & fully tried the practice. The fevers of tropical climates are undoubtedly managed in this way with much more advantage than by any other plan. This fact is established by the concurrent testimony of a large majority of West India practitioners. Many of them, & especially Chisholm trusted entirely to salivation. They exhibited calomel in the largest possible quantities, and applied the mercury externally by means of friction. The amount employed in some instances almost exceeds credibility. Chisholm informs us that he used four or five hundred grains of calomel in the course of 2 or 3 days; and a corresponding quantity of ointment was rubbed in. The object was to induce salivation, and to attain that end, mercury was poured into the system by every possible avenue. — As described by the writers of the West Indies the disease is Bilious, the liver being chiefly affected. On this account it is, that mercury was so successful. When the plan was first adopted in this city, it was thought by many practitioners to be very efficacious; so much so that in

the enthusiasm of the moment they asserted, that when mercury can be made to act, a cure is certainly effected. On cooler reflection, however, they came to distrust the remedy. It cannot be denied, that where salivation is produced, the remedy is often successful. Two actions so contrary cannot co-exist. Place the system completely under the operation of mercury, and the fever will generally be found to give way. But it is extremely difficult to get this medicine to act. Nothing is more hard to accomplish, than to salivate a patient who is affected with a high degree of arterial action. Yellow Fever is a disease of much force in this respect, and of great rapidity of progress; and we can, therefore, have very little to hope from the use of mercury. Could we even excite salivation in the usual time, viz. 3 or 4 days, the patient would ~~generally~~ often die. For the disease frequently runs its course in 1, 2, or 3 days, & in this space it would hardly be possible to put the system under the mercurial impression.

By dissection, as I before mentioned, the seat of the disease is ~~clearly~~ clearly revealed; and the symptoms warrant the conclusion. Thus gastric distress is one of the most prominent

circumstances. An ordinary case of Yellow Fever very much resembles the disease produced by virulent poisons. The similarity, indeed, is so very close, that one is often adduced as an illustration of the other. As soon as the Pathology of Yellow Fever came to be understood, the practice was considerably altered, & I believe, became much more successful. Called in the early stage, it was our object to subdue inflammation of the stomach. To meet this indication, nothing was found so effectual as the liberal use of the lancet. In many instances 20, 30, or even 40 oz. of blood were taken at the first bleeding; and if no material alteration occurred, the same quantity was again detracted in the course of six hours. — It is stated by Dr. Jackson, that in the management of this fever, it was always his practice to make so strong an impression at the first bleeding, as to put an end to the disease. He says that from 60 to 90 oz. was a commonly the quantity which he detracted. This would not be credited, were not the author a man of undoubted veracity, & the testimony of a great many respectable persons in the West Indies adduced in support of what he advances.

The effect of such copious bleeding is said to be, at once to interrupt the train of febrile action in the system, & to terminate the disease. As to the propriety of this practice I cannot decide from any experience of my own. Though, I trust, not a feeble practitioner, yet I should never dare to go so far as this. — The pulse is not always to be taken as a guide. It is a peculiarity of all inflammation in the alimentary canal, that exactly in proportion to the violence of the disease is the depression of the pulse; and the only means to restore it to the natural standard, is to overcome the inflam^n. By bleeding we open it, & render it more voluminous & active. — As auxiliary to the lancet, copious evacuations from the alimentary canal were early induced. Emetics were at one period strongly recommended; but when a more accurate knowledge of the disease was obtained, these were universally abandoned, and mercurial purges substituted. Combinations with the more drastic articles, as gamboge & jalap were once employed, but proved highly mischievous. By the peculiar qualities of calomel,

it may be ~~en~~ used in active inflammation of the alimentary canal, when other purges are forbidden. ~~To answer in~~ It is not more irritating to the intestines than the mildest laxatives as castor-oil. But to answer in Yellow Fever, it must be freely administered. Among the other peculiarities of this disease is ~~the~~ a strong tendency to costiveness, and an insensibility in the intestines to the operation of purgative medicines. I have seen calomel given in drachm doses without producing an effect greater than was demanded. Generally however 15 or 20 grs. is adequate ~~to the~~ for this purpose. When the bowels have in this way been freely evacuated, the operation should be kept up by milder cathartics, as double tartar, Epsom's salts, or castor-oil.

Sweating was early considered very beneficial in Yellow Fever. It was, indeed, entirely trusted to by some practitioners in the first stage. The best plan, however, ~~tell~~ is to ~~A~~ postpone it till evacuation has been effected by the directly depleting remedies. To ~~effect~~ produce diaphoresis active measures are necessary. The external plan of exciting it, is

preferable to the administration of internal remedies; and the vapour bath, which I before mentioned, is admirably adapted to the purpose. The disease in all its stages is accompanied with such irritability of the stomach, that not many of the diaphoretics can be employed. Neither antimony nor nitre are admissible, as they are apt to induce vomiting. It was the custom for a time to administer Dover's powder, but this practice did not long continue. The diaphoretics best suited to the case, & which have been most usually employed are the Expatorium Perfoliatum, the spiritus Mindereri, & the saline or effervescing mixture. —

In many cases there is great increase of temperature on the surface; & here cold applications are infinitely more useful than the plan of sweating. These were especially employed by all the practitioners in the West-India islands.

But while we are using these general remedies, the local ones should not be overlooked. We should always bear in mind that the primary seat of the disease is in the stomach, and that the whole train of symptoms

is secondary & sympathetic. This being the case, blisters over the stomach are of the highest advantage. But ~~to do~~ that we may derive their full benefit, they should be made very large, & should be frequently repeated. As the fever advances they should also be applied elsewhere, & more particularly to the extremities. I have had reason to be pleased with no remedy, except venaesection, more than with these. They quiet the stomach, raise & equalize the pulse, compose the patient to sleep, & sometimes restablish the regular action of health.

Among the local affections, the most distressing, & which imperiously call for attention are the nausea & vomiting, that to a greater or less degree occur in all cases of Yellow Fever. I can suggest no new remedy for these symptoms. All those which I have already mentioned as calculated to allay gastric irritation, should be employed. The effervescing draught, lime water & milk, mint tea, an infusion of Serpentaria are all found beneficial. Much good has sometimes been derived from the Oleum

Terebinthine in doses of 10 or 15 drops, given every half hour, or hour according to circumstances. Benefit has also been experienced from the Tincture of cloves; but as these medicines are stimulating, they should always be reserved ~~till~~ for the last stage. - No remedy is so well calculated to arrest inflammation in the alimentary canal, when it verges towards mortification as spirits of turpentine. But after all, as the symptoms proceed from inflammation of the stomach, though they may be palliated, they cannot be subdued by the remedies just mentioned. To overcome them we must resort to venaesection & blisters.

Another local affection attendant on Yellow Fever, is delirium. This is most effectually relieved by topical depletion ~~t~~ with leeches or cups, or by opening the temporal artery. Much benefit may be derived from cold applications, & in the subsequent stages, from a blister over the cranium.

As the disease pursues then remits or intermits, the Peruvian bark has been sometimes employed; but I seem sam any advantage derived from it. It is apt to

Sugar of lead
Plaster to extremities

increase the nausea & vomiting, and to aggravate the other symp=
=toms. It was, therefore, after a while abandoned, and Quassia
with the other pure bitters were substituted in its place; but
even these were productive of no great advantage.

To allay irritability, and compose the patient to sleep,
opium has been occasionally prescribed; but no ~~advantage~~ benefit
was derived from its employment, when it was taken into the stomach.
Thus administered, it for the most part rendered the fever more
ardent, & the patient more restless. In the last stages, when
there is much inquietude & delirium, it may prove useful
in the form of injection. A drachm or two of Laudanum
mixed with mucilage should be thrown up the rectum.

* As I have indicated to you, such is the outline of the prac=
=tice which, with some slight variations according to circumstances,
came to be universally adopted, after much fluctuation of opinion &
a great deal of discussion, in the case of Yellow fever. The result,
however, was not obtained without much dispute & disreputable
contention. Called in the early stages, & using the remedies
I have mentioned with perseverance, ~~we may anticipate~~
and attention to subordinate circumstances, if ~~they~~ their
full benefit is derived from our measures, we may

anticipate such success, as ~~might~~ could ~~can~~ reasonably be conjectured from a disease of such violence ~~&~~ ~~inveterac~~ & rapidity of progress. But if we expect a greater degree of success, we shall be disappointed. - He who asserts, as some have done, that the Yellow Fever is very manageable, and may be cured with certainty, "does, in the language of the Good Book, "deceive himself, & the truth is not in him." -

Pestis or Plague

3

Lec. As having in many respects a close analogy to Yellow Fever, I now proceed to give some account of Pestis, or the Plague. As I have never seen a case of this disease, all that can be expected from me, is a short digest of the most prominent circumstances connected with the subject. By Cullen it is placed among the Exanthemata; and is defined, a Typhus fever highly contagious in its nature, and attended with extreme debility. Whatever may be the correctness of this definition, the disease is certainly very improperly located. It is undoubtedly a febrile affection, and, therefore, in every nosological arrangement should be associated with the class of fevers. It is only a very few years since we have possessed any accurate information relative to plague. The universal terror which it inspired, very much retarded its investigation. But during the invasion of Egypt by the French, the medical men attached to both armies, availing themselves of the ample opportunities afforded them, have much enlarged and rectified our intelligence respecting it. Contrary to all preceding writers, they have shown that, if at all contagious, it is not so in a high degree. A casual intercourse

with the sick did not produce it. ~~Act~~ Neither the medical attendants nor nurses were often affected with the disease. Dissections were freely conducted, and with perfect impunity. It would seem from the reports alluded to, that it never proved contagious except in crowded, and ill-ventilated apartments; and even under such circumstances, not more so than our ordinary autumnal fevers. Nor was it contagious except in the height of fever, or when the body was covered with perspiration. Discarding then the idea of the contagious nature of pestilence, the writers to whom I refer, consider it as an Epidemick, depending on the usual causes. As respects the Plague of Egypt, it undoubtedly results from the exhalations from the Nile. To establish this point, they bring conclusive and satisfactory evidence. It is always found to follow the recession of that river, which, as you all know, periodically overflows its banks. The filthy surface thus exposed, after a while ~~is~~ becomes perfectly dry by the intense heat of the climate; and as soon as this is completely effected, the Plague uniformly ceases. Like all fevers produced by miasmata, this disease assumes different types. Sometimes it is intermittent or remittent; but most generally is continued, and of a typhous, or highly inflammatory character. These varieties appear to depend much on local circumstances. By our

of the latest English writers on the subject, Dr. Mc. Gregor, ~~it is stated~~, surgeon in chief to the army, it is stated, that among the troops differently situated, the disease was considerably diversified. Among those who were confined to the Hospitals it occurred with low, typhous symptoms; while those in the camps near marshy ~~situations~~ places were attacked with the fever in a remittent or intermittent form; and in higher or more healthy situations, the disease appeared of a highly inflammatory nature.

Admitting all this to be true, still it is not easy to ~~for~~ refuse our consent ~~to the~~ proposition, that the plague is ~~at~~ on other occasions ~~even to a great exte~~ greatly contagious. I shall not here repeat the stories about its contagious nature, which are found dispersed through the medical records. ~~Then~~ Most of these are probably exaggerated, and deserving of little confidence. It is not right, however, to overlook those facts which come to us well authenticated. I shall say nothing of the assertions of the older writers, ~~nor~~ of the more recent accounts given by such persons as have not had opportunities of personal observation. Nor shall I dwell on the circumstance of the plague's being introduced into Europe by the fomites; by which, in pathological language, are

meant all those articles, as clothes, bales of goods, &c, which may convey contagion. But I must say, that though in Egypt the plague may be Epidemick, and propagate like others of the same class; yet elsewhere, and at other times it has proved contagious. More than once in European countries where the plague has prevailed, persons have entirely escaped by avoiding all sources of contagion. Thus it is stated on indisputable authority, that during the ravages of the disease at Rome, in the year 1657, all those persons who were secluded in the monasteries of that city, remained perfectly healthy. It is also stated that when the plague prevailed in Marseilles, a similar security was experienced, by interposing an insuperable barrier between the healthy & ~~the sick, either~~ those who were affected with the disorder, either by surrounding the sick with a cordon of troops, or by some other means. By this management the progress of the disease was completely arrested. – Nor do we want the direct testimony of some writers who have visited the countries affected with pestilence; who inform us that the same protection is there enjoyed, by pursuing a similar course. This is stated by travellers, & by some of

the medical men attached to the British and French armies. But these accounts are so positively contradicted by many authors, that we must receive them with great doubt & hesitation. They are probably not true as regards Egypt.

As yet it has not been accurately ascertained, what time after exposure to the causes of the Plague elapses, before the disease makes its appearance. Probably this is not essentially different from ~~other febrile~~ that which is observed by other febrile affections. In some instances nausea, head-ach, & languor are felt for ~~some d~~ several days previous to the regular attack. More commonly, however, the disease makes its appearance without any well marked premonitory signs. As in other fevers, the patient is seized with rigors succeeded by heat, depression of spirits, prostration of strength, tremors of the limbs, anxiety, palpitations, syncope, stupor, giddiness, & delirium. The pulse at first active & chorded, soon becomes exceedingly weak & tremulous. These symptoms are in a short time followed by fetor of the breath, vomiting of a dark matter resembling the black vomit of Yellow Fever; and in the more advanced stages, by carbuncles, buboes, petechiæ, hemorrhages of depotived blood, diarrhœa, cold sweats, and other bad symptoms. The diarr-

tion of the disease is exceedingly various. Sometimes it extinguishes life in a few hours; and in other cases runs on till the 10th, 15th, 20th, & even 25th day.

Dissections showed pretty much the same appearances as are presented in Yellow Fever. The stomach was more or less inflamed, and in some instances when the fever was protracted, the chylopoietic viscera were in a diseased state. The liver very commonly manifested marks of diseased action; differing altogether in this respect from what happens in Yellow Fever. — By comparing the history of the two diseases, we shall be persuaded of their great resemblance, & perhaps of their perfect identity. They arise from the same cause, and occur in the same season; they affect strangers always in preference to natives; each in most instances destroys the susceptibility of the system to a repetition of the attack; both are contagious under certain circumstances; & each of them may be imported & prevented in a similar manner. Both diseases are entirely arrested by the coming on of cold weather. Yet there are some wide differences, arising, it is probable, from the difference of climate, customs, mode of living, religion, & a variety

of other circumstances. It would appear that the Plague among the natives of Egypt & other Oriental countries, assumes the form of a highly malignant Typhus fever. This is what we should anticipate from their poverty, filth, & squalid wretchedness; as well as from the small, ill-ventilated, & dirty habitations in this ill-fared section of the world. But when the disease attacked the European troops, who were better fed, better clothed, and better lodged, it put on an inflammatory character. Carbuncles, bubos &c, were formerly considered as pathognomonic signs of the Plague, or circumstances which distinguished this disease from every other. But they are not peculiar to the plague. I have seen carbuncles & petechiæ often occurring in Yellow Fever; & they are not rare appearances in Typhus gravior, especially when the case is long & protracted.

Treatment Determining from what has been collected from the best sources of information it appears, that there is no material difference in the management of the two diseases. The treatment of Plague is usually commenced with an emetic; and in this respect differs from what is employed in the Yellow Fever. But it was resorted to in Plague,

under a supposition, that the cause of the disease was still resident in the stomach, and by vomiting ~~it~~ might be eliminated from the system; and the further progress of the disease thus ~~prevented~~ arrested. Whether ~~this is true or not~~ the supposition is true or not, emetics were found very efficacious in the first stage. It is positively stated by the writers who were in the armies in Egypt, that in this way they very generally put an end to the complaint. In many cases of Pestilence, the stomach ~~is~~ is greatly disordered by bilious accumulations. When these are known to exist, emetics are altogether proper.—

The alimentary canal being thus evacuated no remedy was so much confided in by practitioners as Venaesection. This was an ancient practice. It was resorted to so long ago as the ~~age~~ time of Botellus who flourished 2 centuries from the present period; and ~~the~~ its propriety ~~of the practice~~ was fully recognized & supported by Sydenham. This remedy was also used by Rush, who had the most ample opportunities of seeing the disease, and of determining the best mode of managing it. But he confined it-

within narrow limits; applying it only when there were evident signs of an inflammatory character, and when local congestions or determinations existed. As regards venæsection the physician both of the English & French armies differed in opinion. Some used it to a great extent, others excluded it altogether. Determining from all that I have been able to collect, ballancing the evidence on one side, against that on the other, I have concluded, that ~~here~~ as is generally found to be the case, the true method of employing the lancet is in the medium between the extremes. ~~In many cases success was obtained by profuse venæ bleeding, in others~~ Many cases may be successfully managed by profuse bleeding; many require only the moderate employment of the remedy, and in others it should be wholly forbidden.

To treat the plague by sweating has long been an established practice. It would, indeed, seem to be indicated by nature, as there is almost always a greater or less tendency to diaphoresis in the disease. But by

the ancient practitioners it was urged, perhaps, to too great an extent, from the peculiar notion which they entertain of the nature of the fever. They conceived that the disease originated from poisonous matter floating in the system, and that it could be cured only by the elimination of this offending matter through some one of the natural emunctories. Diaphoresis therefore was effected by strong & heating remedies, and was urged to a very great extent; the consequence of which was, ~~that~~ such a state of prostration & extreme debility, that most generally the cases proved fatal; & the remedy thus came into disrepute. But tempered by sound discretion, it was generally found, by the physicians of the French & English armies, exceedingly successful. It was the custom among the Europeans, especially among the English, to employ for this purpose the celebrated James's Powder. Any of the antimonial preparations would probably have been quite as efficacious. But diaphoresis was found to be more effectually promoted by external means, especially the Vapour Bath, than by any other mode.

Conformably to the fashionable practice of the day, some practitioners much preferred cold applications to diaphoretics. These may be employed in different ways. Water cooled down to the lowest degree was sometimes dashed by ~~the~~ tubs-full on the patient; but more generally it was applied by sponges. ~~Hawkins~~ Falconer, Buchan & others declare, that there was no remedy from which such great advantage was derived as from the cold applications. By some physicians frictions to the surface by ice were recommended, when the skin was very hot. This was particularly the practice of a Persian who was in Egypt during the prevalence of the Plague. Much relief was undoubtedly afforded by these means. In confirmation of the mode of treatment alluded to, many facts may be adduced. It is stated by one writer, that it was by no means a rare occurrence, for patients while delirious, attempted to escape from the hospitals, & leap into the Nile; & that when they did this, the symptoms were immediately relieved, and a cure often took place.

Such instances were recorded before the invasion of Egypt. One in particular was related by Savary, where a sick man in the same vessel with himself jumped overboard, & was cured. It is also stated that on an urgent occasion, Buonaparte compelled his troops to march, though a great portion of them were affected with the fever. During the march, a heavy shower of rain occurred, and continued for several hours. All of the soldiers were wetted as if by a shower bath, and many of the sick were in consequence instantly relieved, while the whole of them were essentially benefitted.

There is an external application of another sort, which has also been highly recommended in the treatment of the Plague. It is now half a century since the most extravagant accounts were given of the effects of friction with olive oil. It was originally introduced into notice by Mr. Baldwin consul general of England in Egypt, who stated that by this means we could effectually prevent the body from contagion, & when the disease existed, could generally obtain a cure. The account of Baldwin was confirmed by a Mr. Jackson his successor. To the same point there are not wanting

the attestations of medical men. Very recently, however, it has been affirmed by travellers who were a long time resident in that country, that the account is not entitled to the slightest degree of confidence. They observe that Mr. Baldwin was a very benevolent man, & that the Turks, in order to obtain oil from him, invented the story of its efficacy in the cure of Plague, & thus, by calling on him from time to time, were liberally supplied. This does, indeed, appear to be the foundation of the report. Nevertheless, it is not altogether improbable, that, from the known efficacy of such friections in calming irritation, & subduing febrile excitement, the oil might have produced some good in the management of pestilence.

In the advanced stage of the disease, not a little utility was experienced from the vesicating applications; and in no case did they prove so advantageous as when some local affection existed, especially of the head & stomach. – At this conjuncture, the volatile alkali, camphor, and opium, with other diffusible stimulants were also employed, and with great utility. But in the early stage of Pestilence,

it was the common opinion of the best practitioners; that the Brunonian System, pushed to any extent, was always manifestly injurious, & often fatal in its consequences.

Tracing a supposed analogy between the Yellow Fever & the Plague, those physicians of the British forces who had previously been in the West Indies, and had witnessed ~~in that~~ the effect of Mercury in ~~those islands~~ that climate, employed it also in the latter disease. But they found that, from the rapidity of its progress, the disorder generally terminated, before a salivation could be induced. The same objection applies to the use of mercury in Plague, which I have before stated to apply to Yellow Fever. —

It appears from the statements of writers, that the Plague is neither a more violent nor fatal disease than our Yellow fever. By comparing the bills of mortality we shall find that the number of deaths is nearly equal in both cases. It is stated by M. Desgenettes, who accompanied the army as physician general, that about 1/8 ~~few~~ of those who were attacked, perished; and nearly the same degree of mortality was experienced in the Yellow Fevers.

* ~~The following observations were omitted this year.~~

It is perhaps known to most of you, that Dr. Falli, a philosopher famous for his investigations into the nature of electricity & galvanism, lately visited this city. Before coming here, he had been at Aleppo, and other places where the Plague is apt to prevail in its greatest violence, whether he had gone for the purpose of ascertaining certain points relative to this fever. He communicated to Dr. Mitar the result of his observations, & the doctor has done me the favour to write them down for me his communications. I will read you the paper he presented me.

"The Plague is contagious, and persons who have had it once, rarely or never have it a 2nd time. Infection can be communicated by rubbing the matter of a pestilential bone on the skin. If pestilential & variolous matter mixed together, be rubbed on the skin of a person who had been affected neither with the plague nor small pox, a mild plague would be produced, which would secure the patient from a future attack of either disease. If small pox had been before experienced, the resulting disease would not be so mild. If pestilential matter, mixed with olive oil, be rubbed on the skin, a mild form of the plague is produced, which protects the body from future harm. These results were obtained from upwards of 300 experiments."

As far as I know Dr. Falli is entitled to full credit. His reputation as a philosopher is well known. Having satisfied himself relative to the Plague, he came to this city for the purpose of investigating the nature of Yellow Fever. Not finding it here, he embarked for the Havanah; where, while instituting a course of experiments relative to the disease, he fell himself a victim to its influence.

The Late Winter Epidemick.

3

[L.] To conclude the history of Epidemicks, it remains to call your attention to a disease allied to that class, and known by the name of Typhous Pneumonia, or the Winter Epidemick. In tracing ~~with attention~~ the history of this disease, we find that so early as the year 1806, the attention of several practitioners resident in New Hampshire was arrested by some sporadic cases of a fever, pestilential, and exceedingly malignant in its character. After lingering for a short time in that portion of the country, it gradually diffused itself over New England; and subsequently entered New York, and the Canadian Provinces. Pausing at this last point, it after a while again resumed its journey, & in a direct course, passed through this state to Ohio, & Kentucky. About 2 or 3 years since, it prevailed in the North Western section of Virginia, and finally extended itself over all the southern portion of the United States. It first appeared in Philadelphia, towards the close of the year 1813. Of its approach we were not warned by any of those premonitory signs,

which are commonly the precursors of pestilence. Nothing remarkable was observed in the condition of the weather, or in the appearance of existing diseases. It is true that on the shores opposite to the city, and in some parts of the circumjacent country, we heard, for several succeeding weeks, of the ravages committed by an unknown pestilential fever. Nevertheless we remained perfectly healthy, and without any indications of the dark cloud which was hovering over our heads, & preparing to burst upon us. The season being far advanced, the Epidemick did not continue long among us; and, however fearful in many particular cases, the aggregate of mortality was not considerable. But on its return the succeeding winter, it assumed a more envenomed form, and the victims of its ravages were infinitely more numerous. It is not to be expected, that in the narrow limits to which I am restricted, I should descend into minute details, so as to exhibit a complete view of an Epidemick which was modified by all those causes that influence other diseases. My intention, on the contrary, is to confine myself to the results of my own observations & reflections on the disease as it occurred in my immediate practice; and to what may be collected from the communications which I have received from practitioners in

various parts of the union, on whose veracity I can implicitly rely. All accounts agree in representing the disease as a perfect Proteus, appearing in every ~~diversity~~ variety of shape, and requiring no little diversity of treatment. But whatever form it assumed, it was always accompanied with great, and in many cases, sudden and unprecedented prostration of strength. It ~~usually com~~ frequently commenced with extreme debility, and with alternate chills and flushes of heat. The skin at first hot & cold in rapid succession, soon became ~~dry~~ dry, and pale, or of a mottled appearance. The face was sometimes lived, or more commonly of a hue resembling that of bronze. The ala of the nose were contracted, the forhead smooth & polished, the eyes wild & glassy, and the physiognomy of the patient altogether expressive of an inconceivable degree of anxiety and distress. The pulse, which at first was slow and apparently depressed, ~~was became~~ in a few hours became quick, feeble, and tremulous, like the vibrations of a small chord; and ultimately sunk so entirely, as to be not at all perceptible. Now & then, from the commencement of the disease there was some affection of the head, ~~and~~ and frequently wandering of the

mind, which ran into wild delirium, and terminated in stupor and lethargy. - Occasionally if the attack was much more sudden & violent than above described. It is stated on undoubted authority, that workmen amid their labour & occupations, were seized, and clown down as it were by a stroke of lightning. When the attack was slighter, it was attended with excessive pains in the great or small joints of the body, even in the fingers & toes, and sometimes also in ~~Pains were also occasionally felt in~~ the side, ~~back~~, stomach, back, neck, head, and breast; and these were so acute as to be compared to the sting of a bee or wasp, or the pounding of a hammer on the part. These pains shifting from one part to another were at last generally fixed in the head; and often proved the cause of various disorders of vision, as dimness of sight or ~~total~~ blindness; and sometimes of delirium, coma, and paralysis. But such cases were observed to be of rare occurrence. More commonly the pains shifting from place to place for an hour or two, fastened on the head. Even in the incipient stage extreme languor of body came on, in which the mind also participated. A dry skin, feeble pulse, harsh tongue, and many other symptoms, soon made

their appearance. If the disease was not checked, all these increased with its advancement. To the pain in the head other affections were superadded, as vertigo, throbbing of the temples, a painful stricture across the forehead & eyes, sometimes a morbid vigilance which nothing could seduce, and on other occasions a somnolency so profound as to approach to apoplexy. Delirium was experienced in all its various grades, from mere incoherence of ideas, to the constant utterance of violent rhapsody. If the patient remained in possession of his senses, he was ~~continually~~ disquieted, ~~by~~ and harassed by the fear of death; he would continually sigh; and his imagination would conjure up & present before him the most hideous group of phantasms, & hallucinations. It would be difficult to conceive a situation in which the patient would be more restless, agitated, and distressed; ~~and~~ or one more calculated to excite our sympathy, and exertions in ~~behalf~~ behalf of the sufferer. — But on other occasions there was no local determination whatever. The common complaint of the patient, was of listlessness, and anxiety about the precordia, and tensions across the forehead. There was no

chill nor fever, though the pulse was feeble, irregular, and quick, amounting not unfrequently to 140 or 150 strokes in a minute. This is as insidious a guise as the disease could assume. By the absence of all positive symptoms, it is apt to lull suspicion, till all at once a state of things is developed of the most alarming nature. ——— As directly reverse of the ~~form~~ manner just alluded to, the disease was sometimes ushered in with all the symptoms of Pneumonic congestion and inflammation. These cases commenced with chill and fever, pain in the side & chest, and as might be expected, panting, difficult, and laborious respiration. An unusual determination to the lungs existed, and was indicated by the excessive cough, & bloody expectoration; ~~by after~~ by the laborious breathing; by the flushed & turned countenance; and by the red, suffused, and wandering eye, which were found uniformly to be connected with this form of the fever. — In very many of these cases, & especially as it prevailed to ~~t~~ in the southern states, and among those members of the medical class who came from that portion of our country, there was always some gastric distress, & occasionally violent & unremitting vomiting of bilious matter. The pulse,

as far as I observed, was, in these instances, full, voluminous, & strong, though soft, ~~and~~ readily yielding if compressed by the fingers, and possessing none of that tension which indicates active inflammation. In every leading feature, the disease as it thus appeared, resembled the ordinary bilious pleurisy of our country; and were a practitioner unacquainted with the circumstances called in, he would decide to manage it as an inflammatory affection. But this state of things was not of long continuance. In a day or two, and often in a few hours, the appearance of any inflammatory action was done away, ~~and the~~ typhous condition was distinctly marked, & fully ~~established~~. The muscular power, which was not a little reduced from the first, now rapidly decreased; ~~&~~ all the ~~painful~~ previous symptoms were aggravated; & the mind of the patient before distracted, now sunk into a heavy, and stertorous slumber. ~~The face was generally of a dark, livid colour~~ Most generally, if the tongue & fauces were inspected, they were found covered with incrustations of a dark-brown colour, hard & dry to the touch; ~~and~~ to the other symptoms were connected cold extremities, a haggard countenance, a damp, livid ~~and~~ skin, sometimes speckled with petechiæ

or marked with vibices. Hence arose the name ~~which is~~ of spotted fever, which was commonly applied to the disease in some parts of the country. These examples however were comparatively rare, not occurring in more than ~~one~~ one case out of an hundred. —— I have occasionally met with cases where the throat was apparently the chief seat of the attack. These, however, were seldom seen by me, though it was the most common shape which the disease put on to the South. Nearly all the cases which I met with on a visit to Virginia were of this kind. - There was nothing peculiar in ~~the~~ the mode of attack. ~~It came~~ The disease came on exactly like a common cold with considerable debility. The throat was at first slightly affected. But little time elapsed before there was cause of alarm. At a moment ~~when such an event was~~ not anticipated, the patient was attacked by a total failure of strength, and by a difficult and impeded respiration. This disease differed from all other anginose affections. No enlargement of the tonsils was observable; but the lining membrane of the fauces was swollen and of a mahogany colour, not

flow as in active inflammation. It is my conviction, that this was the most malignant form of the Epidemick. It seemed more rapid in its progress, and attended with circumstances not to be explained. —

What, gentlemen, is this extraordinary disease? To such a question it is by no means easy to convey ~~a satis~~ to you a satisfactory answer. That it is not fever according to the definition of the nosologists, ~~is plain~~ ~~man~~ in all cases at least, is manifest. The shape which it sometimes assumes is entirely destitute of any feature of the febrile affections. It has been known to occur without any preceding chill, without any augmentation of heat, without an acceleration of the pulse, in fine without ~~any~~ no apparent derangement of ~~the functions~~ any function in the animal economy. But such cases were by no means common. Dissections generally shown that inflammation has occurred in the lining membrane of the cavities of the body; but weak & of an Erysipelatous character. The inflamed surfaces appeared livid, & partially eroded, as in the incipient stage of gangrene. In the Brain, Thorax, and Abdomen, there almost-

invariably appears extravasations of dark, thin, grumous blood; exudations of an imperfect lymph; and effusions of serous fluid. —

Taking into view all the phenomena of the disease concerning which we are treating, as well the external symptoms, as the appearances displayed by dissection after death, we can have little hesitation in considering it as a variety of Typhous action; differing, however, essentially from all the species of that order, which have been hitherto ~~discovered~~ described. Nevertheless it does appear that ~~to~~ cases of a disease not wholly different, have been noticed. By the early English authors among whom are Sydenham, and Huxam; and also by Sauvage, the history of a disorder is given, closely allied to our Winter Epidemick. But the parallel is certainly not complete; though, perhaps, as much so as between different cases of any disease, occurring in ~~a~~ different climates, and among ~~a~~ different people. — That form in which the Pulmonary organs ~~are or~~ were concerned, was more accurately described by Sauvage, & denominated by him ~~Pneumonia~~ Peripneumonia Typhoides.

~~Nor has it been w~~ Nor was it wholly unknown till of late in our own country. By Dr. Bard of N. York, a malignant pleurisy which took place in Long Island in the year ——— is described; and we are not without instances of the same disease in other sections of the Union.

Of the causes of this Epidemick little has been ascertained. In common with other diseases of this class, its origin is involved in doubt and obscurity. As yet we know only that it occurs in cold weather, and is dissipated by the warmth of Spring. Hence it seems to be connected with a low degree of temperature; and this is supported by the fact, that a fever very closely allied to it is produced by exposure to an intense degree of cold. It is not an uncommon circumstance to find among the paupers in the Alms House of this city, ~~many~~ some patients who have been admitted in a state of torpor, brought on in this way. From the extreme lethargy of the nerves which prevails in the case alluded to, it is difficult to excite the body by any description of remedies. But when reaction does take place, a weak & low fever is

in the consequence, which resembles very much some forms of our Winter Epidemick. Like that, it is accompanied with low delirium, with a small pulse, glassy eyes, dilated or contracted pupil, and the same ~~last~~ lank, haggard, and distressing expression of the countenance. But, on the other hand, cold cannot ~~always~~ alone be the cause of the Epidemick, because it does not invariably produce the effect, and because the disease sometimes occurs during mild & warm weather. In this dilemma, we are compelled to resort to the gratuitous supposition of a vitiated condition of the atmosphere, to help us to a solution of the difficulty. That the disease is not propagated by contagion, as a general circumstance, appears to be proved by the universality of its prevalence, and by its obeying the general laws of Epidemicks. This is manifested by its compelling all other diseases to acknowledge its supremacy, and to put on its livery. During the prevalence of our Winter Epidemick in this city & other places, every variety of morbid affection, whatever may have been

its primordial nature, received a complexional hue from the predominant influence, and exacted the same sort of treatment. The lancet & other depleting remedies were generally abandoned, and the stimulant & cordial medicines were substituted in the management of all diseases. The approach of this Epidemick wrought a complete revolution in the practice of medicine throughout the United States, from which Physicians have as yet scarcely recovered. Even in the daily & ordinary cases of Winter diseases, are approached with the lancet by physicians with trepidation, and much circumspection. In many instances of the dis. Some cases have occurred, in which there was reason to suspect contagion as the origin of the disease; but these were very few. By some medical men whose opportunities were ample, no doubt is entertained on the subject. By those who support the hypothesis of contagion, the fact is adduced relative to the troops which during the late war were stationed on the Canada frontier. Thus it is stated, that the militia particularly, in returning from the camp,

might be traced through their whole rout, by the spreading of this disease. But it appears to me more than probable that the disorder thus disseminated was not the Epidemick alluded to, but the Typhus or Camp fever, which, confessedly is of a very contagious nature. —

As regards the exciting cause of the disease under consideration, there can be no kind of doubt. They are the same as in all other Epidemicks, and consist of those circumstances which diminish strength, as low living, fatigues, watching, anxiety of mind, & whatever has any tendency to produce derangement in the functions of the body.

Treatment. Two modes of treatment have been proposed, & adopted by different practitioners. By one set it is maintained that the best method is to commence immediately with the use of direct stimulants, as wine, cordials, & the volatile alkali; while by the other the sweating plan is decidedly preferred. ~~My opportunities have been sufficiently to con~~ ~~ample to convince me, that the 2nd. mode of manag-~~ ~~ing~~ My opportunities of comparing the 1st. & 2nd. mode

* Last year

of management have been sufficiently ample, and I have no doubt of the superiority of the latter. The minds of the Physicians of this city are pretty well made up on the subject, and all acknowledge the superior success of the diaphoretic plan early employed. Of the best means of exciting diaphoresis, you have ~~been~~ already been informed. I shall now, therefore, only remark, that in my practice nothing has answered so well as the Doveri's Powder, given every one, two, or three hours; combined with wine whey, made so as to be stimulating, and with hot fomentations applied to the lower extremities, trunk, and arm pits. When sweating was early induced, and continued steadily for 24 hours, a recovery in this disease was almost certain. (* I have found bottles of corn placed in the bed, to have succeeded very well in bringing on a sudorific effect.) Death seldom or never occurred under this mode of management. As the disease advances, and the depression increases, we are to employ that class of remedies which are emphatically called cordial stimulants, or incitants. The volatile alkali, as was said of a hero of antiquity, is here "ipse agmen", I had almost said "uni-

cum remedium?. Not less than 5, or even 10 grains should, in some cases, be administered every half hour. As co-operating with this medicine, hot brandy or madeira wine should be copiously employed. But if, notwithstanding these powerful measures, a tendency to the sinking of the pulse, & other indications of extreme prostration occur, we should resort to the external use of a decoction of cantharides in the spirits of turpentine, and to frictions with Cayenne pepper & brandy, so as to produce vesication. The practice thus detailed is adapted to the more simple forms of the disease. —

In those ~~cases~~ instances where there is local determination, as in bilious Pneumonia, and the Anginose cases, it is universally admitted that some difference of treatment is demanded. Emetics under such circumstances are eminently beneficial. The principle on which they act is as well to evacuate the stomach of its contents, as to make a salutary impression on the system generally through the medium of that organ. To be serviceable, they require, in some cases, to be repeated several times; and the most active, as Tartar Emetic should be preferred. While I was in Alexandria,

during the prevalence of this fever, I proposed the use of James' powder, which was afterward generally adopted. It acts first as an emetic, & then produces a diaphoretic effect. When much bile exists in the alimentary canal, the emetics should be followed up by the mercurial preparations. After the end for which these remedies were administered has been gained, and the disease has been brought to a crisis by the vehicle diaphoretics & other means, if the local determination or congestion continue, blisters are the appropriate remedy. They are especially indicated in the Pneumonic & anginose affections, and in delirium: in the 1st. case apply them completely over the chest, in the 2nd. round the neck; and when the patient is delirious extend them over the whole head.— As relates to the lancet, much controversy has existed. Determining from my own experience, and I believe it is the same with that of a majority of our practitioners, I should say that venæsection is never admissible. In the commencement of the Pneumonic cases, it would seem to be called for by the pulse, by the

heat on the surface, by congestion in the lungs, by acute pain in the chest, and by a variety of other symptoms, especially by the appearance of the blood after it has been drawn. This, as I have previously informed you, is ~~v~~ in general sizy. Notwithstanding all these symptoms, I have never in one case seen venæsection employed, without producing very dangerous, & ~~the~~ commonly fatal consequences. The blood was hardly drawn, before the pulse sunk, and so great a prostration occurred that the patient often died. I have been informed, however, by letters from respectable practitioners in different parts of the United States, that they had used blood-letting, & found it the only successful mode of managing the disease. However it may be in other parts of the Union, as regards the experience of Philadelphia practitioners, it is decidedly against venæsection in this place, under whatever circumstances, and in whatever shape the epidemick may appear.

Distinct in almost every particular relating to it, the ordinary prognosis cannot be applied to the disease of which we are treating. The patient is sometimes suddenly carried off, though he had before displayed every symptom of speedy

convalescence. The pulse often totally fails us as a guide. Nevertheless, there are some symptoms of great danger, among which the least equivocal are such as may be observed by an experienced practitioner from the consideration of the countenance, and habitude of the patient. When the case is dangerous, the countenance is marked by a peculiar expression of wretchedness; or is exceedingly placid with an absence of all kind of intelligence, resembling very much the expression of Idiotcy. There is also a smooth & polished surface, particularly of the forehead, which assumes a complexion like bronze. These are fatal symptoms. —

As presented to you such is a brief account of a disease, which originated more than 10 years ago in the Eastern section of the Union, and has since travelled over a great portion of our country, ~~spreading every where in its track terror & desolation~~. covering the spirits of the people as with a pall, & spreading everywhere in its progress terror, and desolation. Nevertheless it is not necessarily fatal. By pursuing the practice I have detailed to you, it came

to be considered as exceedingly manageable. Compared with the Yellow Fever it is mild in its nature. But to attain success in the treatment of it, we must steadily and perseveringly use the appropriate remedies. Death, in almost every instance, may be traced to a total neglect, or criminal ~~negligence~~ remission in the employment of the means of which we are in possession.

Happily this terrible disease did not long remain among us. No traces of it whatever can now be found in this city, or there is reason to believe that it is equally exterminated in every section of our country.

Typhus Fever.

[Lec. 11] The term Typhus is derived from a Greek word signifying stupor, or heaviness; an affection which is very commonly associated with this form of continued fever. By Nosological writers the Typhus fever has been divided into the Typhus mitior and gravior. But as one of these is only an aggravated condition of the other, without any difference except as regards the degree of violence, I cannot perceive any reason for retaining the distinction. It may be added that Typhus fever, ~~has also been divided into the~~ whether Idiopathic, ~~and~~ or the consequence of some other disease, is of the same nature, presents the same symptoms, demands a treatment conducted on similar principles, and is cured by the same remedies. The only material difference between the two forms of ~~this~~ disease which are mentioned by Nosological writers, is, that the mitior generally comes on with more mildness in all its symptoms, and is more protracted in its continuance, several weeks sometimes elapsing before the occurrence of the crisis. Preceding an attack

good good

of this form of disease, we often perceive ~~for several days~~ an unusual degree of languor, listlessness, sighing &c. with no other symptom denoting its approach. There is no chill nor fever, nor any pain or uneasiness in any one part of the body. The patient complains of debility, with some loss of appetite, and dejection of spirits. After the case becomes more developed, ~~& violent in its symptoms~~, a greater or less degree of derangement occurs to the circulation. — But the Typhus Gravior is much more malignant in its onset, and rapid in its progress. ~~In the milder stage~~ The patient is at first seized with great prostration of strength in which the mind fully participates. But even at this early stage there is some tenderness & soreness of the muscles; with acute pain in the back, head, & extremities; and an alternation of chills & flushes. These symptoms are speedily followed by well defined fever, by intense heat on the surface & no inconsiderable determination to the head, as is indicated by the violent pulsation of the Carotids & temporal arteries, by the suffused ~~eye~~ countenance, the wild inflamed eye, and the tendency to Delirium which constantly prevails.

Examined at this period, the tongue is found dry, & hard, chopped, and incrusted with a brown ~~or black tenacious fur~~ matter. The gums are ~~now~~ affected in nearly a similar manner, & the teeth next are covered with ~~the~~ same dark fur. In the commencement we most generally find the pulse quick, chorded, & active; & other symptoms denoting great disturbance in some of the functions. ~~If~~ Respiration especially, is laborious & frequently interrupted by deep sighing; & the breath is singularly ~~pu-trid~~ hot & offensive. At this period the bowels are uniformly constipated; and much heat, pain, and oppression are felt at the pit of ~~the~~ stomach; combined ~~with~~ now & then with vomiting of bilious matter, & constant unquenchable thirst. — As the disease advances these symptoms are aggravated, and others still more violent are added. Greater debility ~~is now~~ soon comes on; the pain is distressing & acute; the fever increases; the pulse is small, tremulous, & so quick that ~~its pals~~ it can hardly be counted. ~~Temperature of the surface occurs; & the skin is sometimes~~ The temperature of the surface is various, the skin being sometimes hot & dry, & at others cold & damp. The ~~nervous~~ nervous

hemors, which from the beginning form one of the prominent symptoms, are ~~at this time~~ now so much aggravated as to amount to what is called subsultus tendinum. It is not uncommon at this stage for the bowels to give way, & copious discharges of dark feces to take place. Most generally also there are hemorrhages of dark, dissolved blood, from the nose, gums, & mouth; associated with petechia & vibices, or ~~by~~ diffused livid spots in different parts of the body. The pulse now sinks, the extremities grow cold, hiccough comes on, and death finally results. This is the ordinary progress of a fatal case of extreme violence & malignity. But when circumstances are more favourable, and we have a right to calculate on a recovery, an abatement of febrile excitement takes place, the surface becomes moist, the tongue moist & clean, the pulse slower & stronger, the temperature is reduced, ~~the~~ Delirium subsides, and we may add as a propitious circumstance, glandular swellings & scaly eruptions about the mouth.

As regards the origin of Typhus Fever not a little controversy has existed at different times. By a great ma-

jority of writers it is maintained to be caused exclusively by a specific ~~cont~~ contagion. That it is produced in this way under certain circumstances & in certain places, cannot be doubted. This has been shown principally by the experiments of Haygarth, and is confirmed by the whole tenor of medical experience & observation. By the experiments alluded to it is proved that Small Pox itself is not more contagious. Of 188 persons, men, women, & children, who were exposed to Typhous contagion in a crowded & ill ventilated room, ~~for a few days only~~ only 8 escaped the disease. It also appears that the sphere of its action is circumscribed. Contagion never extends to a neighbouring apartement, nor to any distance in the same room provided this was well ventilated. Nevertheless, that it may be conveyed by fomites, as wearing apparel, bed clothes &c. positive experiments, & authentic facts render certain. That is ~~curious~~ a very curious circumstance, contagion may exist in the clothing of an individual, so as to affect others with ~~the~~ disease, while the individual himself escapes. It is in the recollection of some of you, ~~what I~~ that at what was called the black assizes at

before, a number of prisoners were arraigned in a room, who had been brought from a prison where the Jail fever prevailed, & who had not themselves been affected with the disease; but to such a degree did the contagion exist in their clothes, that the judge, jury, & many of the by-standers were seized, & not a few of them died. - Many other instances of this kind have been related. But in general the disease is indebted for its contagious character, to the circumstance of ill-ventilated and crowded rooms. - As soon as the patients are removed into well-ventilated apartments, it loses the power of propagating itself by contagion. In confirmation of this a recent fact ~~as it~~ which occurred in this city may be adduced. The Typhus fever lately made its appearance in the criminal department of the Jail, the rooms of which were extremely crowded & ill ventilated. This continued to extend among the prisoners, till finally the sick, amounting to 40 or 50, were removed into a large apartment which had previously been used as a place of religious worship. The disease was thus checked, ~~as~~ because its power of generating contagion was terminated.

As relates to the precise period at which the contagion takes effect, it cannot be determined with absolute certainty. Most generally it is 10 ~~days~~, though often it is extended to 50, 60, or 70 days. Extraordinary as this may appear, still there can be no doubt of the fact. It is proved by the experiments of Haygarth, Bancroft, & other writers; & my own experience goes to confirm the same conclusion. During the last summer, many vessels arrived at this port crowded with emigrants, among whom the Ship Fever prevailed to a great extent. Many of these were bought as redemptioners, and in ~~many~~ several instances, those who had not been affected, remained 5 or 6 weeks in the city, before the Typhus fever attacked them. After conceding all this to the advocates for contagion, still it must be confessed that the disease arises from a variety of other causes. It proceeds from whatever debilitates the system, or depresses to any extent the mind. It is often occasioned by Marsh exhalations, and sometimes by great fatigue, and a low, abstemious diet

The Typhus Fever, as I have above described it,

is not a common disease of this city, and perhaps prevails to no great degree in any parts of the United States. ~~It is generally to be found in crowded & filthy places, as jails, camps, hospitals ships and military hospitals; and depends upon causes to which our happy country is a stranger.~~ It is found in camps, jails, ships, hospitals, & other crowded receptacles of poverty, vice, and wretchedness; and finds no where in this happy country, either a source of generation, or a medium of wide diffusion. ~~Exp~~ Within my knowledge it has never existed in this city to any extent; and my own experience, therefore, with regard to it is narrow & imperfect. From time to time, however, some sporadic cases have occurred; & within the last summer I have had more extensive opportunities of seeing the disease. Trusting to the information I have derived from these sources, & to what I have witnessed in the great Hospitals of Europe, I shall proceed to deliver what I consider the proper mode of management.

Treatment Whatever may be their difference as to theoretical

views, practitioners, I believe, concur in the propriety of commencing the treatment with an emetics, when we are called in the early or forming stage. They were ~~gener~~ formerly prescribed under the impression, that the contagious matter ~~of the disease~~ still remained in the ~~syste~~ stomach, & that by evacuating this ~~with~~ the further progress of the disease was arrested. Whether this is so or not, there can be little doubt of the efficacy of the remedy. But emetics do much more than is commonly imagined. If employed as mere evacuants they are beneficial, ~~they~~ the effect which they produce in another way is not less salutary. The disease which we have described is to be considered as a chain, whose first link is located in the stomach, whence it is extended to every other part of the system; and by making a strong impression on that organ, we may interrupt the associated morbid actions, & thus assist very much in effecting a cure. For this purpose emetics are the appropriate remedies. But it is only in the forming stage that they are at all admissible. ~~If~~ Exhibited at an advanced

period, they ~~heighten the~~ alarming symptoms, and increase the difficulty & embarrassment in the cure.

The alimentary canal being thoroughly evacuated, it was at one time the established practice, to treat the disease with antimonial medicines, so managed as to produce nausea. This ~~practice~~ was introduced by Cullen, & has been followed by his numerous disciples in every section of the world. It is now nearly 20 years since the propriety of the practice was first called in question, & purging recommended in its place. To the work of Hamilton I refer you for illustration of this latter method of managing the disease. Not all satisfied with the antimonials in the treatment of Typhus fever, after ample trials in the Hospital of Edinburg, he was induced totally to abandon them, and to substitute purging in their place. ~~The~~ The result of his experience has been confirmed by the attestations of practitioners of the greatest celebrity in every part of the country. He ascribes the efficacy of purges to their acting throughout the whole extent of the ali=

mentary canal, and to their carrying off the feculant matter which remains in large quantities in the bowels. To obtain this full effect he ~~now~~ directs that they should be given every day, and that the most active, as calomel & jalap, separately in combination, should be preferred. But while he thus attaches to copious purging, he does not exclude other remedies. — The advantages of his plan have been amply attested. I have myself employed with great satisfaction, & the evidence of its superior efficacy is too strong & conclusive to be resisted. It is to be remembered that in case of Typhus fever the bowels are always loaded, & obstinately constipated. The patient has strong sensations of internal heat, & there is not a little gastric distress. These circumstances seem imperiously to call for such evacuations; & every practitioner knows how much relief & comfort is afforded by them. — No one conversant with the operation of purges will fear their producing debility at this period. Nothing is more better established, than that when the alimentary canal is oppressed with accumulations of feculant matter,

the evacuation of this matter relieves the irritation of the system, and adds vigour to the body. That this is so, has been too well confirmed by the testimony of respectable practitioners, to admit of cavil or controversy.

As one of the auxiliary remedies, much confidence has been reposed in cold applications to the surface. These are especially demanded by the burning heat of the skin; by the quick, active pulse; by the general inquietude & restlessness which are felt by the patient. In this condition of the system, it is well ascertained, whatever may be the nature of the disease, that cold ~~is too po~~ applications are even more effectual in relaxing the vessels, and producing perspiration, than the opposite remedies. The ancients were well acquainted with this fact. Celsus recommended copious draughts of cold water in ardent fevers. But the practice was rejected, or lost sight of for many centuries. About one hundred years ago it was revived, & so much attachment had the author of the change for the remedy,

that he called it the febrifugum magnum. About 25 or 30 years since it was employed by Dr. —— in the islands of Jamaica; but did not become general till the celebrated work of Currie appeared; since which time it has received the sanction of distinguished practitioners in various sections of the Globe. As yet it has not been generally adopted in the United States; certainly not to the same extent as in Great Britain & her Colonial dependences in the East & West Indies. The practitioners of this country are too much attached to the lancet & other depleting remedies, to make use of cold applications. By some of us ~~this are~~ ~~to~~ sponging the surface is employed to allay heat in the autumnal fevers; & we are also in the habit of applying ice in certain cases to the head. But we carry the remedy comparatively to a very small extent. In the European Hospitals, nothing is more common, than in the early stages of Typhus fever, to place the patient in a shower bath, or to dash upon him pails-full of cold water. The effect most commonly is to produce ~~a~~ perspiration, & to allay all the existing symptoms,

But a remedy which proves so active should not be rashly or indiscreetly employed. The circumstances demanding it have been clearly indicated by Currie. It is said by him that the applications should be resorted to when the heat of the body is steadily above the natural standard, when there is no sensation of chilliness, and especially when there is no general or profuse perspiration. Those cases are to be excepted where there is much local congestion, and especially in the lungs. The principle on which Currie supposed the remedy to act, was merely by abstracting the excess of heat from the surface. But a different view of this subject is presented by Dr. Jackson, who, if sometimes carried away by enthusiasm, is, however, eminently distinguished by the force & originality of his ~~view in~~ opinions in theory & practice. The cold applications he supposed to ~~act~~ operate by making a strong and general impression on the system, by which the existing morbid actions are altered, & which is wholly independent of the reduce-

tion of temperature. It is all important, in his opinion, to attend to the evidence of a susceptible condition of the body; which, when it is wanting, he endeavours to restore by friction & the warm bath. What he means by a susceptible condition of the body, is such a state that when cold is applied the system will react. – I have, however, been directed, in the use of cold applications to the surface, by the rules & precepts laid down by Currie. I have ~~seen~~ not ventured to pursue a different course; though I have never believed for a moment, that the remedy acts merely by lessening the heat of the body. That it ~~by~~ operates to a certain extent in this way cannot be denied; but it is infinitely more beneficial by the positive healthy action which it imparts to the systems. –

L. The disease not being arrested by the remedies already mentioned, it is proper next to resort to means calculated to excite diaphoresis. At one time it was the universal practice to manage the early stage of Typhus Fever in this way. During the reign of the Humoral Pathology, a system of notions ~~originated in the eclipse of Medical Reason~~ was entertained, originating in the eclipse of Medical reason, and of which some traces are perceptible at the present moment. By these it was taught that fever of this nature is excited & kept up by particles of contagion floating in the circulation. Constructing their practice on this hypothesis, they early induced sweating, & urged it to a great extent, with the view of eliminating the offensive matter through the pores of the skin. As medical knowledge advanced, the ~~theory~~ doctrine was generally abandoned; and is now remembered only as one of the many examples afforded by our science of false theory being productive of mischievous practice. In the present as well as almost every other case of disease, there is a point at which we may resort beneficially to diaphoretics. But there is nothing peculiar in their operation, even as-

mitting contagion to exist. They act here on the same general principles as in other fevers. When we administer them, a due attention should be paid to the circumstances of the case; and the milder or more stimulant should be resorted to, as they seem to be called for by the state of the system. The milder diaphoretics are generally indicated. The Salina draught or neutral mixture is exceedingly applicable to the case. It is highly grateful to the stomach, alleviates thirst, abates the heat, and relaxes the surface, causing some slight degree of perspiration. Nearly the same effect is produced by the dulcified spirits of Nitre if administered freely & at short intervals. The discredit into which this remedy has fallen is partly to be ascribed to the small & inadequate dose in which it was generally prescribed. To obtain its salutary effects in the case before us, we should give one drachm or more, every one or two hours. It has been administered in various states of combination, the best of which is made by the addition of Laudanum, when the latter is not prohibited. Even more effectual than the remedy just mentioned is the Spiritus Mindereri.

* Of last year

But this is less agreeable to the patient, and will sometimes be refused, when the former will be taken without difficulty or hesitation. Either of them, however, aided by the vapour bath and warm beverages, is in most cases sufficient for the purpose. *(It would seem that the antimonial preparations are peculiarly suited to this stage; but so many intelligent writers condemn them, that I cannot but feel sceptical on the subject. Why they should not be so beneficial here as in other fevers it is impossible to say. But in the practice of physick, though there may be no apparent reason why one remedy should be preferred to another, yet if the concurrent testimony of practitioners decide that it should be preferred, we must abide by their decisions. Consult the more modern writers, and you will find it laid down, that the antimonial preparations are not so useful here, as some other diaphoretics. They are said to prostrate the system, induce debility, and to have no tendency to produce a solution of the fever. I myself have had little experience in this case. All, therefore, that I can do is to examine the evidence on both sides, & give you the result.)

As I have enumerated, such are the principal remedies with which we combat the 1st. stage of Typhus fever. You will perceive that they are all of the depleting & evacuating kind; or at all events, that they are calculated to reduce action, and to diminish heat & excitement. Notwithstanding what has been alledged to the contrary, it is demonstrable that this species of fever has, in the ~~commen~~ commencement, more or less of the inflammatory diathesis. The hard, chordee pulse; heat on the surface; the suffused countenance; the tendency to delirium, are all indications of this disposition. Examined after death, the body shows many marks of inflammation, and its usual effects, especially in the brain. ~~Ease~~ Blood drawn in the early stages of Typhus Fever, is almost ~~size, and~~ always size, & denotes a considerable degree of inflammation. But whatever maybe the pathological view of the subject, there can be no doubt of the correctness of the ~~reasons~~ practice. My opportunities have enabled me to compare this plan of treatment, with that of stimulating from the commencement; and I am decidedly in favour of the former. Determining from my own experience, I would say

that it is sometimes necessary to use the lancet. ~~But~~ I have frequently employed it, & invariably with unequivocal success. But it should be used with discrimination, and is more applicable to cases of Typhus Fever occurring in private practice, than to those which are met with in public & crowded institutions. The treatment of this disease has undergone an essential alteration within the last few years. By consulting the late medical writers we shall find, that they are almost all in favour of venæsection, & that to a considerable extent. Perhaps it was Sydenham who first began the practice of blood-letting in Typhus Fever; and in this he has been followed by ~~Sydenham~~ Hunan & other practitioners of celebrity. It is curious to trace the influence of opinion on the treatment of disease. You all know the great change which was wrought in the practice by Sydenham. Directly opposite to the prevailing sentiments he introduced that pathology which considers the febrile condition to depend on a ~~an~~ greater or less inflammatory action, & hence flew directly to the depleting plan of treatment. After a while his ~~views~~ views be-

came firmly established, and they may be traced through the various medical schools of Europe till the time of Cullen. This great teacher being particularly attached to the nerves, his opinions and modes of practice received a complexional hue from ~~the~~ his narrow contemplation of the human body. The views of Cullen were further confirmed by the pathology of Brown, which was presented in so fascinating a shape as to be almost universally entertained. The pathology of Typhus fever & the practice which flows from it may be stated in a few words. Whatever may be the cause of the disease, and more particularly when it consists in contagion, the vital energies are exceedingly crippled, and consequently all the actions and functions of the body are imperfectly performed. But this effect does not proceed from exhaustion. The ship sinks not from the decay of her trunk, or the bursting of her planks; but because she is overloaded. The parallel, however, here ceases: we can relieve the ship by lightening her of her burthen; but we cannot thus relieve the condition of the system. All that we can do is to lessen the violence of the effects. When the cause is extremely

violent the system is depressed beyond the power of reaction. We must be directed by the symptoms. If there is a feeble, tremulous pulse; cold, damp skin; & low, muttering delirium, we must infer that the elasticity of the body, ~~being~~ paralyzed by the weight of the cause preying upon it, is unable to react. The practice in this case is to use the stimulant and cordial remedies. But if there exist a ~~full~~ hard, chorded ~~pulse~~, active pulse; great heat; a suffused countenance; strong pulsation in the carotid & temporal arteries, we must conclude that there is an inflammatory diathesis, and that the case is to be treated by the directly depleting remedies. Whenever these symptoms occur, never fail to make use of the lancet, and to follow it up by the other evacuants. If you are asked on what authority you employ a practice so different from that generally in use, tell them that you do so in mine; not on mine alone, gentlemen, but also on that of Sydenham & Hunan, supported by the whole tenor of medical experience from their time to the time of Cullen.

The treatment as I have delivered it to you, is what I deliberately believe most applicable to the first stage of Typhus fever. But if the disease be not arrested by these remedies, a great prostration will come on, and an opposite ~~description~~ practice will be necessary. Under these circumstances the use of the Volatile alkali has been highly applauded. It may be given in various ways; but that which has been ~~[illegible]~~ employed with greatest success, or ~~which~~ has received ~~the~~ most general applause, is ~~that~~ what has been denominated the Volatile Julep. The following is the formula I commonly use.

Take of Carbonate of ammonia — ℥i.
" Gum arabic — ℥ij.
" loaf sugar — ℥j.
" water — ℥vi.

It is right at the same time to prescribe strong wine whey. There seems to be a harmony or affinity between certain remedies; and in no one instance more than between the Volatile alkali & wine whey. To make the latter take 2 parts of milk and one of wine; heat the milk till it boils, and then add the wine. The curds are ~~the~~ next to be

seperate, and if the liquor is too strong, dilute it with water. Loaf sugar may be added to render it more palatable. — So close is the harmony betwen ~~this~~ preparation & the volatile alkali, ~~that wherever one is employed alkali~~, that wherever ~~the~~ latter is employed, it will be right to use the former also: The proper dose of the julap above ~~mentioned~~ is a table spoon full every 2 or 3 hours. But if the symptoms are urgent, it should be administered more frequently, and the dose may be repeated every hour or even half hour. — Camphor is another medicine which has enjoyed a great share of medical confidence. By many it is preferred to the volatile alkali. It is not my intention to institute a comparison between ~~these~~ articles. My own conviction is ~~that~~ the alkali is the ~~best~~ better of the two. But in every protracted case it is best to use one & then the other remedy. After a few days the carbonate of ammonia becomes disagreeable to the patient, or the susceptibility of the body to its action is diminished; and here we may use the camphor with advantage. — ~~It is admirable~~ It may be

* Last year.—

administered in the form of a Julap or a Bolus. But the latter on account of its bulk is disagreeable, and is also apt to nauseate the stomach & be rejected. The Julap of the Dispensatories is a neat, but feeble preparation. The following is a better one.

* Take of Camphor - ℥ i.
— Myrrh ʒ ß.
— loaf sugar - ℥ ij.
— water - ℥ vi.

Of late practitioners have been much in the habit of employing a solution of camphor in milk. — Within a few days I have been informed by my friend Dr Wells, that this article is soluble in seltzer water; and thus we have afforded us the best possible means of administering it.

6
2
4

3/72
24
48
24
72

Hermes

bt, pressed his brother's hand; and often bade

born to the servants of God, and the compa-
ns of each other: as we sprang from [illegible]
nt, so we naturally partake of the same [illegible]
We are brethren, sons of the same father; we
ends; for surely kindredship should be the most ex-
ed friendship. Let us not then disagree, because
r herdmen have disagreed; since that were to en-
urage every idle pique, and senseless animosity.
reat indeed has been our success since our migra-
on into this fair country: we have much substance,
nd much cattle. But what! shall brothers quarrel,
ecause it has pleased Heaven to prosper them? This
ould be ingratitude, impiety! But if, notwithstand-
g these persuasives, thy spirit is still troubled, let us
separate: rather than contend with a brother, I would,
ard as it is, even part with him for a time. Perhaps
he occasion of dispute (which I have already forgot-
en) will soon be no more remembered by thee. Is
ot the whole land before thee? Take then my bles-
ing and my embrace, and separate thyself from me.
To thee is submitted the advantages of choice; if
hou wilt take the left hand, then that I may not ap-
ear to thwart thy unbrotherly, I will take the right;
r, [illegible] inclined to [illegible] country which lies
on the right, then will I go to the [illegible]. Be it as thou wilt,
nd whithersoever thou goest, [illegible] mayest thou be
Lot listened to his brother, and departed. He cast
is eyes on the well-watered plains of Jordan.
They [illegible] appears to have been with
hope of increasing his wealth: while Abra-

it, I have said to myself, *The man gives too much for his whistle.*

When I saw another fond of popularity, constantly employing himself in political bustles, neglecting his own affairs, and ruining them by that neglect; *He pays indeed*, said I, *too much for his whistle.*

If I knew a miser who gave up every kind of comfortable living, all the pleasure of doing good to others, all the esteem of his fellow-citizens, and the joys of benevolent friendship, for the sake of accumulating wealth; *Poor man!* said I, *you indeed pay too much for your whistle.*

When I met a man of pleasure, sacrificing every laudable improvement of mind, or of fortune, to mere sensual gratifications; *Mistaken man!* said I, *you are providing pain for yourself, instead of pleasure; you give too much for your whistle.*

If I saw one fond of fine clothes, fine furniture, fine equipages, all above his fortune, for which he contracted debts, and ended his career in prison; *Alas!* said I, *he has paid dear, very dear for his whistle.*

In short, I conceived that great part of the miseries of mankind, were brought upon them by the false estimate they had made of the value of things, and by their giving too much for their *whistles.*

B. FRANKLIN.